

## PART B - FEE(S) TRANSMITTAL

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22852 7590 08/30/2007

**FINNIGAN, HENDERSON, FARABOW, GARRETT & DUNNER**  
**LLP**  
**901 NEW YORK AVENUE, NW**  
**WASHINGTON, DC 20001-4413**

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<b>Ramona A. Hopkins</b>	(Depositor's name)
<i>Ramona A. Hopkins</i>	(Signature)
<i>Nov. 28, 2007</i>	(Date)

11/28/2007 INTEFSW 00006274 10779638

01 FC:1501 APPL. NO. 66504	FILING DATE 11/28/2007	1440.00 DP 300.00 DP	FIRST NAMED INVENTOR Renwen Zhang	ATTORNEY DOCKET NO. 08702-0068-01000	CONFIRMATION NO. 9082
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**TITLE OF INVENTION: METHODS AND COMPOSITIONS FOR HEALING AND REPAIR OF ARTICULAR CARTILAGE**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/30/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROBINSON, HOPE A	1652	514-012000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Finnigan, Henderson,  
 2 Farabow, Garrett &  
 3 Dunner, L.L.P.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Genetics Institute, LLC

Cambridge, MA (US)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

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